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APPLICANTS
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**** CONTINUING DATA *******
 This appln claims benefit of 60/208,087 05/31/2000
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 and claims benefit of 60/214,036 06/23/2000
 and claims benefit of 60/264,537 01/26/2001

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 07/31/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY DE	SHEETS DRAWING 3	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 7
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TITLE
CATALYSTS FOR OLEFIN POLYMERIZATION

FILING FEE RECEIVED 1460	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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